BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

018804.000004

			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY						
TOTAL CLAIMS			20		-			RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS 20				inus 20= * 2		b		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	3 mi	nus 3 =	* /			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter						column 2	l	TOTAL	370	OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
_		(Column 1)		(Colu		(Column 3)	<u> </u>	SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	1	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN'	T CLAIM		┛╽	+140=		OR	+280=	
								TOTAL			TOTAL	
										OR	ADDIT. FEE	
_		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	<u>)</u>					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
	Independent	*	Minus	***		=	4	X42=		OR	X84=	,
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		 UH	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	▋┃	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ILTIPLE DEPENDENT		T CLAIM	CLAIM				Un		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	nber Previously Pa	id For" (Total o	r Independ	ent) is the	e highest numb	per fou	and in the app	propriate box	c in co	lumn 1.	